

Notice of Service Coordination Levels

Service Coordination is defined by Medicaid policy as the coordination of services to assure that people have access to a full array of needed services, thereby preventing the need for institutionalization or more costly services or interventions. When providing Service Coordination, it is expected that the Service Coordinator actively identify needs and resources, actively coordinate services to meet those needs, and actively monitor those services over time to assure that they continue to be necessary and appropriate. When active and on-going interventions for a Service Coordinator are required in order to access needed services, Level I Service Coordination services will be provided.

For those who do not require the active, on-going interventions of a Service Coordinator in order to access needed services, the SC Department of Disabilities and Special Needs (SCDDSN) provides Level II Service Coordination. Short term, limited Service Coordination is provided at this level but there is no annual plan.

- ☐ According to SCDDSN's Level I/Level II Service Coordination Assessment,
- ☐ According to SCDDSN's policy, directive 700-04-DD: Levels of Service Coordination, as it relates to eligibility determination,

_____ requires Level II Service Coordination.
(Name)

This means that you may contact the Service Coordinator anytime you need assistance. An estimate of the cost of services you receive (if applicable) and information on what is and how to report abuse/neglect is available upon request from the Service Coordinator.

Service Coordinator: _____

Address: _____

Telephone Number: _____

If the above Service Coordinator is not available, you should ask for the Service Coordinator Supervisor.

If you wish to discuss this decision, please contact the above Service Coordinator. If you wish to appeal this decision, please write or tell the Service Coordinator or the supervisor that you wish to appeal. They will then instruct you about the procedures. You may also have someone make an appeal for you.

Service Coordinator/Early Interventionist

Date _____

Service Coordinator/Early Interventionist Supervisor

Date _____